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AUG 07 2006

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24902 7590 05/04/2006
KENNETH J. LUKACHER
SOUTH WINTON COURT
3136 WINTON ROAD SOUTH, SUITE 301
ROCHESTER, NY 14623
08/08/2006 HWDONG2 00000002 10787473

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Tammy S. Moynihan		(Depositor's name)
<i>Tammy S. Moynihan</i>		(Signature)
August 3, 2006		(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/787,473	02/26/2004	Milind Rajadhyaksha	ML-0493C	6991

TITLE OF INVENTION: SYSTEM AND METHOD FOR ENHANCING CONFOCAL REFLECTANCE IMAGES OF TISSUE SPECIMENS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	08/04/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
PUNNOOSE, ROY M	2877	356-369000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1 <input type="text"/> KENNETH J. LUKACHER 2 <input type="text"/> 3 <input type="text"/>
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

LUCID, INC.
THE GENERAL HOSPITAL CORPORATION

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ROCHESTER, NEW YORK
BOSTON, MASSACHUSETTS

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 10

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A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Kenneth J. Lukacher

Date August 3, 2006

Typed or printed name Kenneth J. Lukacher

Registration No. 38,539

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMITTAL OF PAYMENT OF ISSUE FEE (Small Entity)
(37 C.F.R. 1.311)

Docket No.

ML-0493C

Applicant(s): Milind Rajadhyaksha et al.

AUG 07 2006

PATENTS & TRADEMARKS
U.S. DEPARTMENT OF COMMERCE

Application No.	Filing Date	Attorney or Agent Name	Customer No.	Group Art Unit	Confirmation No.
10/787,473	02/26/04	Roy M. Punnoose	024,902	2877	6991

Invention: SYSTEM AND METHOD FOR ENHANCING CONFOCAL REFLECTANCE IMAGES OF TISSUE SPECIMENS

Mail Stop Issue Fee
COMMISSIONER FOR PATENTS
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Transmitted herewith are the following for the above-identified application.

Issue Fee Transmittal Form PTOL-85

Utility Fee: \$ 700.00 Design Fee: _____ Plant Fee: _____

Publication Fee: \$ 300.00

A check in the amount of \$1,030.00 is attached. (Issue Fee, Pub. Fee, 10 patent copies)

The Director is hereby authorized to charge and credit Deposit Account No. 50-1101 as described below.

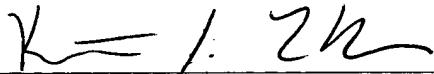
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Signature

Dated: August 3, 2006

Kenneth J. LuKacher
Attorney for Applicants
Registration No. 38,539
South Winton Court
3136 Winton Road South, Suite 301
Rochester, New York 14623
Telephone: 585-424-2670
Facsimile: 585-424-6196

KJL/tsm

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08/3/2006

(Date)

Signature of Person Mailing Correspondence

Tammy S. Moynihan

Typed or Printed Name of Person Mailing Correspondence